

Freedom as Participation.
Representations and Determinants
for the Recovery of voice hearers.

A call for participation

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3th International Meeting LIVING WITH VOICES: PATHS TO RECOVERY
Savona, 2 settembre 2001

Research proposal: Objectives

A socio-cognitive analysis of voice hearers' recovery:

1)What does recovery mean to voice hearer?

2)What does the involvement in the voice hearers movement mean for the individuals' recovery processes?

=> We need to construct a model of the recovery process

1. Studying representations of the “Recovery” concept

- Recovery is a multi-facet concept.
- Different stakeholders hold different conceptions of the recovery process which need to be studied systematically:
 - Voice hearers & mental health services’ users
 - Professionals
 - Family members
 - General public

2. Explaining the significance of participation in the Voice-Hearer movement for individuals' recovery process

Being involved in the voice hearer movement is likely a determinant factor to stimulate and support the recovery process

Social movements represent a unique opportunity to study the changes occurring at individual and collective level:

- a)“ Emancipatory pride“- to overcome the experiences of shame or humiliation. (see Castelfranchi, before; Pocobello & Castelfranchi, 2009)
- b)Participation in activities of mutual support - to overcome the experience of powerless, loneliness, helplessness.

3. Constructing a model of the recovery process

- data do not speak for themselves!

State of the art:

- Scientific evidences that recovery happens
- Different attempts in the definition of recovery as concept;
- Relevant body of testimonies providing an account of the main conditions and factors of recovery

Still,

- there is skepticism and even pessimism concerning recovery as a phenomenon
- a coherent recovery theory is missing

What should a recovery model account for?

- Well defined 'concepts';
- The different 'mechanisms' (relational psychological, political, ...);
- Explain the way recovery works (positive outcomes);
- Explain why “traditional psychiatric settings” cannot work (negative outcomes).

Why is a recovery theory so important?

Knowledge transfer:

- For the implementation of recovery-oriented mental health services;
 - For “teaching recovery” to the “next generation” of students and professionals

Consider: Italian case (1978 – now)

Theoretical tools

- Socio-cognitive and theory of goal-directed action (Castelfranchi e Miceli)

and

- Stories of recovery
 - (see e.g. Pocobello and el-Sehity, 2011)

Proto-model (1)

“It is not possible to recover”

Diagnosis- negative expectations- Psychiatric treatment- hopelessness

Vicious circle of loss of power (social power; ... self-trust)

Acceptance of the role of patient (compliance to psychiatric treatment)

Proto-model (2)

“Recovery exists”

Surprise – Turning point— belief revision process
(peer as trusted source of information)

– regain the motivation to recovery

Hope-

Admiration and Emulation-

Planning and commitment transform hope to trust

Proto-model (3)

Recovery happens: ownership

- Acceptance
- Responsibility
- Social claim of ownership - struggle for personal powers
- Involvement in “identity movements” - struggle for collective powers
- Mad-pride- internal and social rehabilitation of a harm self

Participatory research

- To improve on existing knowledge which is lopsided by being generated only by professionals, thus excluding users who are the major stakeholder to health and social care and who have considerable lived experience to learn from;
- Enabling users: involvement, engagement, empowering;
- Enhancing the credibility of research among those who feel it is imposed on them by people who do not understand their perspective

(Ramon, 2006)

More – a methodological benefit

Call for participation

Synergy for a common challenge between
research, expert for experiences and civil society

Participatory research (1)

Workgroup - 3 voice hearers and 3 researchers

- Research questions
- Methodological decisions
- Data collection
- Data analysis
- Ethical issues
- Disseminations and exploitation of the results

Support Activities:

- Training
- Payment for work
- Email and telephon support

Multi- methods approach:

- - free associations;
 - - questionnaire;
 - - interviews or focus group.
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- Stakeholders based approach